

# PAPERWORK REDUCTION ACT SUBMISSION

Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the Supporting Statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.

1. Agency/Subagency originating request:  
Department of Labor, Employment and Training Administration

2. OMB control number: b. ☐ None  
a. 1 2 0 5 -- 0 2 2 4

3. Type of information collection (*check one*)  
a. ☐ New collection  
b. ☐ Revision of a currently approved collection  
c. ☒ Extension of a currently approved collection  
d. ☐ Reinstatement, without change, of a previously approved collection for which approval has expired  
e. ☐ Reinstatement, with change, of a previously approved collection for which approval has expired  
f. ☐ Existing collection in use without an OMB control number

4. Type of review requested (*check one*)  
a. ☒ Regular  
b. ☐ Emergency--Approval requested by:     /    /      
c. ☐ Delegated

5. Small entities  
Will this information collection have a significant economic impact on a substantial number of small entities? ☐ Yes ☒ No

6. Requested expiration date  
a. ☒ Three years from approval date  
b. ☐ Other--Specify:                     

*For b.- f., note item A2 of Supporting Statement instructions*

7. Title Title 29 CFR Part 30—Equal Employment Opportunity in Apprenticeship Training

8. Agency form number(s) (*if applicable*)  
ETA 9039

9. Keywords  
Apprenticeship, Apprentice, Equal Employment Opportunity, Affirmative Action

10. Abstract Title 29 CFR Part 30 sets forth policies and procedures to promote equality of opportunity in apprenticeship programs registered with the U.S. Department of Labor and recognized State Apprenticeship Agencies.

11. Affected public (*mark primary with "P" and all others that apply with "X"*)  
a. ☒ Individuals or households d. ☐ Farms  
b. ☒ Business or other for-profit e. ☒ Federal Government  
c. ☒ Not-for-profit institutions f. ☒ State, Local, or Tribal gvt

12. Obligation to respond (*mark primary with "P" and all others that apply with "X"*)  
a. ☐ Voluntary  
b. ☒ Required to obtain or retain benefits  
c. ☐ Mandatory

13. Annual reporting and recordkeeping hour burden  
a. Number of respondents 28,800  
b. Total annual responses 50,770  
    1. Percentage of those responses collected electronically 0%  
c. Total annual hours requested 5,842  
d. Current OMB inventory 5,714  
e. Difference +128  
f. Explanation of difference  
    1. Program change  
    2. Adjustment +128

14. Annual reporting and recordkeeping cost burden (*in thousands of dollars*)  
a. Total annualized capital/startup costs -0-  
b. Total annual costs (O&M)  
c. Total annualized cost requested -0-  
d. Current OMB inventory  
e. Difference  
f. Explanation of difference  
    1. Program change  
    2. Adjustment

15. Purpose of information collection (*mark primary with "P" and all others that apply with "X"*)  
a. ☐ Application for benefits e. ☐ Program planning or management  
b. ☐ Program evaluation  
c. ☐ General purpose statistics f. ☐ Research  
d. ☐ Audit g. ☒ Regulatory or compliance

16. Frequency of recordkeeping or reporting (*check all that apply*)  
a. ☒ Recordkeeping b. ☐ Third party disclosure  
c. ☒ Reporting  
    1. ☒ On occasion 2. ☐ Weekly 3. ☐ Monthly  
    4. ☐ Quarterly 5. ☐ Semi-annually 6. ☐ Annually  
    7. ☐ Biennially 8. ☐ Other (*describe*)

17. Statistical methods  
Does this information collection employ statistical methods?  
☐ Yes ☒ No

18. Agency contact (person who can best answer questions regarding the content of the submission)  
  
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